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Applicant or Patentee: Nikiforos Kollias et al.
 Serial or Patent No.: 08/978,956
 Filed or Issued: November 26, 1997
 For: COMPOUND DELIVERY USING IMPULSE TRANSIENTS

ATTORNEY DOCKET NO. 00786/25

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS
 (37 CFR 1.9(f) and 1.27(d)) - NONPROFIT ORGANIZATION

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

Name of Organization: The General Hospital Corporation
 Address of Organization: 55 Fruit Street, Boston, MA 02114
 Type of Organization:

- ☐ UNIVERSITY OR OTHER INSTITUTION OF HIGHER EDUCATION
☒ TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 USC 501(c) and 501(c)(3))
☐ NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA
 (NAME OF STATE:)
 (CITATION OF STATUTE:)
☐ WOULD QUALIFY AS TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 USC 501(c) and 501(c)(3)) IF
 LOCATED IN THE UNITED STATES OF AMERICA
☐ WOULD QUALIFY AS NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF
 AMERICA IF LOCATED IN THE UNITED STATES OF AMERICA
 (NAME OF STATE:)
 (CITATION OF STATUTE:)

I hereby declare that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 CFR 1.9(e) for purposes of paying reduced fees under section 41(a) and (b) of Title 35, United States Code with regard to the invention entitled COMPOUND DELIVERY USING IMPULSE TRANSIENTS by inventors Nikiforos Kollias, Apostolos G. Doukas, Thomas J. Platte, Daniel J. Mcauliffe and Shun Lee described in

- ☐ the specification filed herewith.
☒ application serial no. 08/978,956, filed November 26, 1997.
☐ patent no. issued.

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization with regard to the above identified invention.

If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed below and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9(c) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).


*NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

Full Name: Pharma-Wave LLC
 Address: 30-31 Union Wharf, Boston, MA 02108

☐ INDIVIDUAL ☒ SMALL BUSINESS CONCERN ☐ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Name: David J. Glass
 Title: Associate Director for Patent, Office of Technology Affairs
 Address: The Massachusetts General Hospital, 13th Street, Building 149, Charlestown, MA 02129
 Signature: 
 287381.011 Date: 12/17/1998

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ATTORNEY DOCKET NO. 00786/297002

Applicant or Patentee: Mikiforos Kollias et al.
Serial or Patent No.: 08/978,954
Filed or Issued: November 26, 1997
For: COMPOUND DELIVERY USING IMPULSE TRANSIENTS

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 CFR 1.9(f) and 1.27(c)) - SMALL BUSINESS CONCERN

I hereby declare that I am

- ☐ the owner of the small business concern identified below:
☒ an official of the small business concern empowered to act on behalf of the concern (identified below:

Name of Small Business Concern: Pharma-Wave LLC

Address of Small Business Concern: 30-31 Union Wharf, Boston, MA 02108

I hereby declare that the above identified small business concern qualifies as a small business concern as defined in 13 CFR 121.12, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees to the United States Patent and Trademark Office, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.

I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the invention, entitled COMPOUND DELIVERY USING IMPULSE TRANSIENTS by inventor(s) Mikiforos Kollias, Apostolos G. Doukas, Thomas J. Flotte, Daniel J. McAuliffe and Shun Lee described in

- ☐ the specification filed herewith.
☒ application serial no. 08/978,954, filed November 26, 1997.
☐ patent no. . issued .

If the rights held by the above identified small business concern are not exclusive, each individual, concern or organization having rights to the invention is listed below and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d), or a nonprofit organization under 37 CFR 1.9(e). NOTE: Separate verified statements are required from each named person, concern or organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

Full Name: The General Hospital

Address: 55 Fruit Street, Boston, MA 02116

☐ INDIVIDUAL ☐ SMALL BUSINESS CONCERN ☒ NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status when any new rule 53 application is filed or prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent on which this verified statement is directed.

Name: David Muller, Ph.D.

Title: President

Address: Pharma-Wave LLC, 30-31 Union Wharf, Boston, MA 02108

Signature: 

Date: 7/20/98

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COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled COMPOUND DELIVERY USING IMPULSE TRANSIENTS, the specification of which

☐ is attached hereto.

☒ was filed on November 26, 1997 as Application Serial No. 08/978,954 and was amended on _____

☐ was described and claimed in PCT International Application No. _____ filed on _____ and as amended under PCT Article 19 on _____

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information I know to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56.

I hereby claim the benefit under Title 35, United States Code, §119(e)(1) of any United States provisional application(s) listed below:

U.S. SERIAL NO.	FILING DATE	STATUS
<u>60/031,882</u>	<u>November 27, 1996</u>	<u>PENDING</u>

I hereby appoint the following attorneys and/or agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: J. Peter Fasse, Reg. No. 32,983; Janis K. Fraser, Reg. No. 34,819; Y. Rockv Tsao, Reg. No. 34,053; David E. Johnson, Reg. No. P-41,874; John F. Hayden, Reg. No. 37,640 and Eldora L. Ellison, Reg. No. 39,967.

Address all telephone calls to J. Peter Fasse at telephone number 617/542-5070.

Address all correspondence to J. Peter Fasse, Fish & Richardson P.C., 225 Franklin Street, Boston, MA 02110-2804.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patents issued thereon.

Full Name of Inventor: Nikiforos Kollias

Inventor's Signature: 

Date: 7/14/97

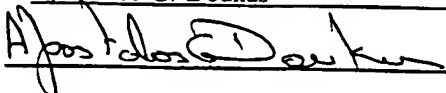
Residence Address: Watertown, Massachusetts

Citizen of: United States of America

Post Office Address: 633 Everett Avenue, Watertown, Massachusetts 02172

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COMBINED DECLARATION AND POWER OF ATTORNEY CONTINUED

Full Name of Inventor: Apostolos G. Doukas

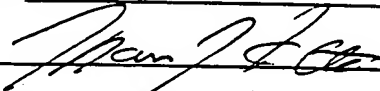
Inventor's Signature:  Date: 7/14/1998

Residence Address: Belmont, Massachusetts

Citizen of: United States of America

Post Office Address: 22 Edgemoor Road, Belmont, Massachusetts 02178

Full Name of Inventor: Thomas J. Flotte

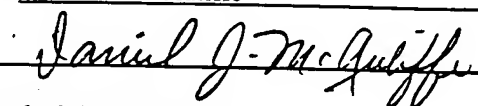
Inventor's Signature:  Date: 7/14/98

Residence Address: Boston, Massachusetts

Citizen of: United States of America

Post Office Address: Two Hawthorne Place, #10-N, Boston, Massachusetts 02114

Full Name of Inventor: Daniel J. McAuliffe

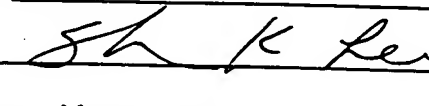
Inventor's Signature:  Date: 7/14/98

Residence Address: Boxford, Massachusetts

Citizen of: United States of America

Post Office Address: 15 Moonpennv Drive, Boxford, Massachusetts 01921

Full Name of Inventor: Shun Lee

Inventor's Signature:  Date: 7/14/98

Residence Address: Boston, Massachusetts

Citizen of: United States of America

Post Office Address: 43 Hancock Street, Boston, Massachusetts 02114